THE UNITED STATES PATENT AND TRADEMARK OFFICE

COMMISSIONER FOR PATENTS P.O. Box 1450 Alexandria, VA 22313-1450

REVOCATION AND POWER OF ATTORNEY WITH NEW POWER OF ATTORNEY AND CHANGE OF CORRESPONDENCE ADDRESS

I hereby revoke all previous powers of attorney given in the applications and patents identified below. Furthermore, I hereby appoint the practitioners at Customer Number 70001.

Please change the correspondence address for the following applications and patents to the address associated with Customer Number 70001.

| Attorney Docket No. | Application No. (Patent No.) | Filing Date (or Issue Date) |
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I am the Assignee of record of the entire interest. See 37 C.F.R. § 3.71. A Statement Under 37 C.F.R. § 3.73(b) is enclosed.

| Signature of Assignee of Record: | | |
|----------------------------------|--------------------|--|
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| *Total of1 | form is submitted. | |

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